

United States Patent and Trademark Office

UNITED STATES DEPARTMENT OF COMMERCE United States Patent and Trademark Office Address COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, Virgins 22313-1430

APPLICATION NUMBER 10/723,991

FILING OR 371 (c) DATE

FIRST NAMED APPLICANT

ATTORNEY DOCKET NUMBER

11/26/2003

5123275452

Michael Dahlin

1039-0011-CIP

Date Mailed: 08/26/2004

34456 TOLER & LARSON & ABEL L.L.P. 5000 PLAZA ON THE LAKE STE 265 AUSTIN, TX 78746

CONFIRMATION NO. 7990 FORMALITIES LETTER *OC000000013640688*

AUG 3 1 2004 PRADEN

NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1,53(b)

Filing Date Granted

Items Required To Avoid Abandonment:

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given TWO MONTHS from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The statutory basic filing fee is missing. Applicant must submit \$ 385 to complete the basic filing fee for a small entity.
- The oath or declaration is missing. A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$65 for a small entity in compliance with 37 CFR 1.27, must be submitted with the missing items identified in this letter.

The applicant needs to satisfy supplemental fees problems indicated below.

The required item(s) identified below must be timely submitted to avoid abandonment:

 Additional claim fees of \$342 as a small entity, including any required multiple dependent claim fee, are required. Applicant must submit the additional claim fees or cancel the additional claims for which fees are due.

SUMMARY OF FEES DUE:

Total additional fee(s) required for this application is \$792 for a Small Entity

\$385 Statutory basic filing fee.

09/02/2004 AWONDAF1 00000006 502469 10723991

\$65 Late oath or declaration Surcharge.

01 FC:2001

02 FC:2051 03 FC:2202

65.00 DA 342.00 DA

Total additional claim fee(s) for this application is \$342

Page 2 of 2

■ \$342 for 38 total claims over 20.

Replies should be mailed to:

Mail Stop Missing Parts

Commissioner for Patents

P.O. Box 1450

Alexandria VA 22313-1450

A copy of this notice MUST be returned with the reply.

+refined

Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE





FACSIMILE COVER SHEET

DATE:

August 31, 2004

TO:

MS MISSING PARTS

FAX NO.:

703-746-4060

FROM:

John R. Schell

Registration No.: 50,776

Registration No.: 30,77

RE U.S. App. No.: 10/723,991, Filed November 26, 2003 Applicant(s): Michael Dahlin, et al.

Atty Dkt No.: 1039-0011-CIP

Title:

ELECTRONIC HEALTHCARE INFORMATION AND DELIVERY

MANAGEMENT SYSTEM WITH AN INTEGRATED MEDICAL

SEARCH ARCHITECTURE AND CAPABILITY

NO. OF PAGES (including Cover Sheet): 8

MESSAGE:

Attached please find:

Transmittal Form (1 pg)

Fee Transmittal (1 pg)

Response to Notice to File Missing Parts (1 pg)

Notice to File Missing Parts (2 pgs, Return Copy)

Declaration and Power of Attorney (2 pgs, executed)

5000 Plaza On The Lake Suite 265 AUSTIN, TEXAS 78746

Tel: (512) 327-5515 Fax: (512) 327-5452

CONFIDENTIALITY NOTE

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Signature

5123275452

PTQ/SB/21 (02-04) Approved for use through 07/31/2008, OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Are required to respond to a collection of information unless it displays a valid OMB control number. Under the Panageork Reduction Act of 1995, no persons Application Number 10/723,991 TRANSMITTAL Filing Date November 26, 2003 FORM First Named Inventor Michael Dahlin, et al Art Unit (to be used for all correspondence after initial filing) 3626 Examiner Name UNASSIGNED Attorney Docket Number Total Number of Pages in This Submission 1039-0011-CIP **ENCLOSURES** (Check all that apply) ~ After Allowance communication Fee Transmittel Form Drawing(s) to Technology Center (TC) Appeal Communication to Board Fee Attached Licensing-related Papers of Appeals and Interferences Appeal Communication to TC Amendment/Reply (Appeal Notice, Brief, Reply Brief) Petition to Convert to a After Final Provisional Application Power of Attorney, Revocation Change of Correspondence Address Proprietary Information Affidavits/declaration(a) Other Enclosure(s) (please Terminal Disclaimer Extension of Time Request Identify below): Notice to File Missing Parts (Return Request for Refund Express Abandonment Request Copy, 2 pgs); Declaration (2 pgs, Information Disclosure Statement CD, Number of CD(s) executed) Remarks Certified Copy of Priority Document(s) CUSTOMER NO.: 34456 Response to Missing Parts/ ~ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Film Individual name John R. Schell, Registration No. 50,776 Signature Date 8 · 3 › · 64 CERTIFICATE OF TRANSMISSION/MAILING I hereby cartify that this correspondence is being facaimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mall in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. Typed or printed name Elise K. Dougherty

This collection of Information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 GFR 1.14. This collection is estimated to 2 hours to complete, including gathering, propertry, and cubmitting the completed application form to the USPTO. Time will vary depending upon the including case. Any comments on the amount of time you require to complete this form and/or suppestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date

8-31-04

if you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Michael Dahlin, et al.

ELECTRONIC HEALTHCARE INFORMATION AND DELIVERY

MANAGEMENT SYSTEM WITH AN INTEGRATED MEDICAL

SEARCH ARCHITECTURE AND CAPABILITY

App. No.:

10/723,991

November 26, 2003

Examiner:

Title:

UNASSIGNED

Group Art Unit:

3626

Atty. Dkt. No.: 1039-0011-CIP

Conf. No.:

Filed:

7990

MS MISSING PARTS Commissioner for Patents PO Box 1450 Alexandria, VA 22313-1450

RESPONSE TO NOTICE TO FILE MISSING PARTS OF APPLICATION

Dear Sir;

In response to the Notice to File Missing Parts of Application mailed August 26, 2004, please find enclosed herewith:

 \boxtimes a Transmittal Form (1 pg);

図 a Fee Transmittal Form (1 pg);

図 a Response to Notice to File Missing Parts of Application (this page, 1 pg);

 \boxtimes a copy of the Notice to File Missing Parts of Application (Return Copy, 2 pgs);

M a combined Declaration and Power of Attorney, executed (2 pgs); and

8/31·04	MANN
Oate Control of the C	John R. Schell, Registration No.: 50,776
	Agent for Applicant(s)
	TOLER, LARSON & ABEL, L.L.P.
	5000 Plaza On The Lake, Suite 265
	Austin, Texas 78746
	(512) 327-5515 (phone)
	(512) 227 5452 (fou)

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited

Elise K. Dougherty

Dagagethy Hyrau hay lake d

Name (Print/Type)

Signature

John R. Schell

THE TRADEMARK

PTO/SB/17 (10-03)
Approved for use through 07/31/2006, OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paporwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2004

(\$) 792.00

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1,27

TOTAL AMOUNT OF PAYMENT

Application Number	10/723,991	
Filing Date	November 26, 2003	
First Named Inventor	Michael Dahlin	
Examiner Name	UNASSIGNED	
Art Unit	3626	
Attorney Docket No.	1039-0011-CIP	

(Complete (if applicable))

Telaphone 512-327-5515

8.31.04

Complete If Known

Deposit Account Deposit Account Deposit Account TOLER LARSON & ABEL LLP The Director is authorized to: (check of the floor) Credit any overpayments Toler Larse Entity Charge any additional fee(s) or any undersyment of fae(s) Charge any additional fee(s) or any undersyment of fae(s) Charge any additional fee(s) or any undersyment of fae(s) Charge any additional fee(s) or any undersyment of fae(s) Toler is authorized to: (check of the falling fee or cover sheet) Toler is authorized to: (check of the falling fee or cover sheet) Toler is authorized to: (check of the falling fee or cover sheet) Toler is authorized to: (check of the falling fee or cover sheet) Toler is authorized to: (check of the falling fee or cover sheet) Toler is authorized to: (check of the falling fee or cover sheet) Toler is authorized to: (check of the falling fee or cover sheet) Toler is authorized to: (check of the falling fee or cover sheet) Toler is authorized to: (check of the falling fee or cover sheet) Toler is authorized to: (check of the falling fee or cover sheet) Toler is authorized to: (check of the falling fee or cover sheet) Toler is authorized to: (check of the falling fee or cover sheet) Toler is authorized to: (check of the falling fee or cover sheet) Toler is authorized to: (check of the falling fee or cover sheet) Toler is authorized to: (check of the falling fee or cover sheet) Toler is authorized to: (check of the falling fee or cover sheet) Toler is authorized to: (check of the falling fee or cover sheet) Toler is authorized to: (check of the falling fee or cover sheet) Toler is authorized to: (check of the falling fee or cover sheet) Toler is authorized to: (check of the falling fee or cover sheet) Toler is authorized to: (check of the falling fee or cover sheet) Toler is authorized to check of the falling fee or cover sheet or cover sheet) Toler is authorized to check of the falling fee or cover sheet) Toler is authorized to check of the fallin	METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)	_
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Régistration No. (Attornev/Adant)

50,776

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